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PTO/SB/21 (12-07) Approved for use through 12/31/2007. OMB 0651-0031

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ACTION ACT OF 1995.	Application Number	10/775,419
TRANSMITTAL	Filing Date	February 10, 2004
FORM	First Named Inventor	Tiwari, Ashish
	Art Unit	2123
(to be used for all correspondence after initial	Examiner Name	Pierre Louis, Andre
Total Number of Pages in This Submission	Attorney Docket Number	SRI 4840-2
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	ENCLOSURES (Check all that apply)									
√	Fee Trans	mittal For			Drawing(s) Licensing-related	d Papers			Appeal	Communication to TC Communication to Board eals and Interferences
	Amendment/Reply After Final Affidavits/declaration(s) Extension of Time Request Express Abandonment Request Information Disclosure Statement Certified Copy of Priority Document(s) Reply to Missing Parts/ Incomplete Application			Petition Petition to Convert to a Provisional Application Power of Attorney, Revocation Change of Correspondence Address Terminal Disclaimer			posto	Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) Proprietary Information Status Letter Other Enclosure(s) (please Identify below): postcard		
			ssing Parts FR 1.52 or 1.53	THRE	OF APPLICA	NT ATT	DRNEY C	DR AG	FNT	
Firm N	ame !	Deborah		/,	A A	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
Signate	ıre		1 (//	(111	1					
Printed	name	Deborah	Neville	3 303						
Date		Decemb	er 20, 2007			Ţ	Reg. No.	34,886	3	
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the dat	e shown be	elow:	//	u						
Typed	or printed r	name	Deborah Neville						Date	December 20. 2007

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	Application Number	10/775,419					
FEE TRANSMITTAL	Filing Date	Feb 10, 2004					
For FY 2008	First Named Inventor	Tiwari, Ashish					
Applicant claims small entity status. See 27 CER 1.27	Examiner Name	Pierre Louis, Andre					
✓ Applicant claims small entity status. See 37 CFR 1.27	Art Unit	2123					
TOTAL AMOUNT OF PAYMENT (\$) 230	Attorney Docket No.	SRI 4840-2					
METHOD OF PAYMENT (check all that apply)							
Check Credit Card Money Order None Other (please identify):							
Deposit Account Deposit Account Number:	Deposit Account N	ame:					
For the above-identified deposit account, the Director is her	eby authorized to: (check	all that apply)					
Charge fee(s) indicated below	Charge fee(s)	indicated below, except	for the filing fee				
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FEE CALCULATION							
1. BASIC FILING, SEARCH, AND EXAMINATION FEES			ì				
FILING FEES SEAR Small Entity	CH FEES EXAI Small Entity	MINATION FEES Small Entity					
Application Type Fee (\$) Fee (\$)		(\$) Fee (\$)	Fees Paid (\$)				
Utility 310 155 510	255 21	0 105 _					
Design 210 105 100	50 13	0 65 _					
Plant 210 105 310	155 16	0 80 _					
Reissue 310 155 510	255 62	0 310 –					
Provisional 210 105 0	0	0 0 _					
2. EXCESS CLAIM FEES Small Entity Fee Description Fee (\$) Fee (\$)							
Each claim over 20 (including Reissues)	50	25					
Each independent claim over 3 (including Reissues)	210	105					
Multiple dependent claims		370	185				
Total Claims Extra Claims Fee (\$) Fee	Multiple Depend	dent Claims Fee Paid (\$)					
HP = highest number of total claims paid for, if greater than 20.		<u>Fee (\$)</u>	i ee raiu (\$)				
	Paid (\$)						
- 3 or HP = x = HP = highest number of independent claims paid for, if greater than 3.							
3. APPLICATION SIZE FEE	(1 1 1 1						
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer							
listings under 37 CFR 1.52(e)), the application size fee due is \$260 (\$130 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).							
Total Sheets Extra Sheets Number of each	h additional 50 or fracti		Fee Paid (\$)				
	_ (round up to a whole n	umber) x	_=				
4. OTHER FEE(S) Non-English Specification, \$130 fee (no speall entity discount) Fees Paid (\$)							
Other (e.g., late filing surcharge): 2 month extension to Respond to Office Action 230							
SUBMITTED BY 1 / /							
Signature / / / / / /	Registration No. (Attorney/Agent) 34,886	Telephone ₆₅	0-323-2969				
Name (Print/Type) DEBORAH NEVILLE	(Automoy/Agent)	Date Dec 20,					

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